

BOROUGH
OF
T E N T E R D E N .

ANNUAL REPORT


FOR

1 9 1 0 ,

BY

JAMES SCOTT TEW, M.D., D.P.H.,

Medical Officer for Health.



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Borough of Tenterden.

AREA AND POPULATION.

The following gives the present area of the Borough and the population during the recent census years.

Area in Statute Acres.		Inhabited Houses.			Population.		
Land and Inland Water.	Inland Water only.	1881	1891	1901	1881	1891	1901
8946	21	695	705	718	3511	3429	3243

The Population of the Borough of Tenterden, estimated to the middle of 1910, was 3079, showing a decrease of 164 since the census of 1901, and of 18 on the estimated population of 1909.

The number of births registered was 59, including 33 of males and 26 of females, giving a **Birth-rate** of 19·1 per 1,000 of population, as against 22·9 in 1909, and 24·0 in 1908.

Forty-eight deaths were returned, including 21 of males and 27 of females. From this number must be deducted 4 deaths of persons dying in the Union Workhouse, and belonging to the Tenterden Rural District, making a nett total of 44 deaths.

The **Death-rate** was 14·2 per 1,000 of the population, as against 17·7 in the previous year, and 10·2 in 1908.

The **Principal Epidemic Diseases** include Small-pox, Measles, Scarlet Fever, Diphtheria, Whooping Cough, Fever (Typhus, Enteric or Typhoid Fever, and Pyrexia of uncertain origin) and Diarrhœa.

Two deaths were caused by these diseases, viz: by Enteric Fever.

The **Epidemic Disease death-rate** was 0·64 per 1,000 of population, as against a nil rate in the previous year, and 0·64 in 1908.

The **Infant Mortality**, i.e., the number of deaths of infants under one year of age per 1,000 registered births was 84, as compared with 126 in the previous year, and 13 in 1908.

The birth-rate in **England and Wales** in 1910 was 24·8 per 1,000 of the population, which is 0·8 per 1,000 below the rate in 1909, and lower than the rate in any other year on record. Compared with the average in the ten years 1900—1909, the birth-rate in 1910 showed a decrease of 2·7 per 1,000.

The death-rate in 1910 was 13·4 per 1,000, which was 1·1 per 1,000 below the rate in 1909 and lower than the rate in any other year on record; compared with the average rate in the ten years 1900—1909, the death-rate in 1910 showed a decrease of 2·4 per 1,000.

The rate of mortality among infants under one year of age to 1,000 registered births was 106, which is 3 per 1,000 below the rate in 1909. The rate in 1910 was lower than in any other year on record. Compared with the average in the 10 years 1900-1909, the rate of infantile mortality in 1910 showed a decrease of 26 per 1,000.

The epidemic disease death-rate was 0·99 per 1,000 living, against 1·28, 1·34, and 1·13 respectively in the three preceding years.

The vital statistics for the District for 1910 are satisfactory, and, as shown by the following table, compare favourably with the rates for England and Wales; the epidemic disease death-rate, and the infant mortality being respectively 0·35 and 22 below the corresponding rates for the country generally. The general death-rate is 0·8 higher than that for the whole country :

		Death-rate.	Epidemic Disease Death-rate.	Infant Mortality.
England and Wales	...	13·4	0·99	106
Tenterden Urban	..	14·2	0·64	84
			0·35	22

The birth-rate for this District was 3·8 below that of the previous year, and 5·7 under that for the country generally.

A.—NOTIFIABLE INFECTIOUS DISEASES.

Under the provisions of the Infectious Disease (Notification) Acts, 1889 and 1899, the following diseases are compulsorily notifiable in the District, viz., Small-pox, Cholera, Diphtheria Membranous Croup, Erysipelas, the disease known as Scarlet Fever or Scarlatina, and the Fevers known by any of the following names—Typhus, Enteric or Typhoid, Relapsing, Continued, and Puerperal. This is the list as given in the principal Act, with no additions.

Thirteen cases were notified, with 2 deaths, as against 6 non-fatal cases in the previous year, and consisted of 10 cases of Scarlet Fever, 1 of Erysipelas, and 2 of Enteric Fever.

Diphtheria.—It is satisfactory to record that no cases of this disease occurred throughout the year. There were 2 non-fatal cases in 1909.

On the 15th August, 1910, an Order, cited as “The Diphtheria Anti-toxin (Outside London) Order, 1910,” was issued by the Local Government Board. This Order sanctions the provision by District Councils of a temporary supply of diphtheria anti-toxin, and of medical assistance in connection with the temporary supply of diphtheria anti-toxin, for the poorer inhabitants of their district, subject to the arrangements with respect to the keeping, distribution, and use of the diphtheria anti-toxin being made in accordance with the advice of the Medical Officer of Health.

I submitted the following letter to your Council to be sent to the medical men in the district, and on receiving sanction it was sent out to them :

“Dear Sir,

The Diphtheria Anti-toxin (Outside London) Order, 1910.

“In view of the fact now generally recognised, viz., that in cases of Diphtheria, and more particularly in laryngeal diphtheria or membranous croup, the chances of the patient’s re-

“covery are vastly increased by the injection of anti-toxin at
 “the earliest possible stage of the disease, the Tenterden Urban
 “District Council wish me to inform you that they intend at
 “once to carry out the suggestions contained in the above
 “Order.

“A stock of Diphtheria Anti-toxin will be kept at the office
 “of the Sanitary Inspector (Mr. W. S. Mortley, Poplar Cottage,
 “St. Michaels.)

“This will be for the injection of patients who are too poor
 “to pay for so expensive a remedy themselves.

“Any qualified medical practitioner can obtain a dose or
 “doses on giving the name and address of the patient for whom
 “it is intended. In some cases it may be more convenient and
 “may facilitate the early use of the remedy if the medical
 “practitioner uses his own anti-toxin and later on either refunds
 “it from the Council’s store, or sends an account (giving the
 “names and addresses of the patients for whom it was used),
 “to the Sanitary Inspector as early afterwards as convenient.

“It must be clearly understood that the early administration
 “of anti-toxin shall in no way substitute prompt removal to an
 “Isolation Hospital, should one be available.

“This free provision of anti-toxin as above suggested applies
 “to poor persons and also those who are actually in receipt of
 “parish relief.”

Scarlet Fever—Ten non-fatal cases were notified, as against
 2 in the previous year. Eight of the cases were notified in
 March, and the remaining two on the 1st April.

Practically all were children attending the British Ashford
 Road School, which I inspected on several occasions, and I also
 visited homes of the patients, as well as absentees from school.

There is but little doubt but that the disease in this small
 epidemic was spread through direct contact in school.

Four of the cases occurred in one family.

I anticipated a good many more cases than actually occurred,
 especially in view of the fact that in one case in particular the
 patient was one of a large family, overcrowded in a small
 house, so that no proper isolation was available.

The disease was of a mild form.

The following shows the age periods at which the cases occurred :

1—5 years.	5—15 years.	15—25 years.
<hr/> 2	<hr/> 7	<hr/> 1——10 cases.

In consequence of a communication made on the 17th March, 1910, by a gentleman in the District to the Local Government Board, I was instructed through your Council to furnish a report, and which I duly made on May 2nd, 1910.

As this report deals with the health of the district, as regards infectious diseases, for the past 15 years and contains perhaps some interesting figures, as well as expressing my then and present opinion as regards hospital isolation for the district, I think it well to place a part of that report on record by including it in my annual one.

The epidemic at the date of communication to the Local Government Board (March 17th, 1910), consisted of 4 notified cases of Scarlet Fever. Since then six further cases have been notified (4 of which were in the same family) and one in the Union Workhouse Infirmary, so that altogether five private houses only have been invaded.

No cases of this or any other disease have been notified since April 1st.

Those ten cases, with one case of Erysipelas in January, include all the notified cases of infectious disease during the present year up-to-date (May 2nd).

I am fully aware that efficient isolation cannot be obtained in the majority of cottages as suggested.

When an efficient hospital, with proper staff and ambulance is provided, there is now generally no objection raised to removal either on the part of the patients or those having charge of them ; but for *compulsory* removal a magistrate's order is required—a course to which I have never, so far, resorted.

I have frequently advocated the provision of a small hospital which could be available for both the Urban and Rural Districts of Tenterden—see my annual reports of 1902, 1904, 1906, and 1908.

The matter of provision of hospital accommodation has not been strongly pressed by me for several reasons :

(1) The Districts, both Urban and Rural, are decreasing in population.

(2) The agricultural depression during the past several years has rendered it difficult to raise large sums for hospital purposes, and unless a reasonably efficient building is provided, with the necessary adjuncts of good nurses, a disinfecter, laundry accommodation, and ambulance, the isolation of patients only becomes a farce. Further than this, when a patient is removed to an isolation hospital, no matter what indifferent home conditions exist, he is in charge of the local authority, who must provide accommodation, &c., of a satisfactory character, and at corresponding expense.

The further reasons for my not having pressed this are the very small amount of infectious disease arising, and the very small number of deaths resulting from this class of disease, facts doubtless in a large degree attributable to the excellent situation of the town, and the good clean air of the neighbourhood.

The following facts may be of interest :

During the past 15 years, in five of those years there has been a *nil* epidemic disease death-rate, i.e., no deaths have occurred from Small-pox, Scarlet Fever, Diphtheria, Fevers (including Typhoid), Measles, Whooping-cough, or Diarrhoea.

The average epidemic disease death-rate during those 15 years has been only 0·4 per 1,000.

The following table shows the notified cases during the past 5 years :

Year.	Epidemic Disease death rate.	Cases of Scarlet Fever.	Diphtheria	Erysipelas,	Enteric Fever.	Totals.
1905	nil	2	1	1	...	4
1906	·63	12	...	2	..	14
1907	·31	4	6	1	...	11
1908	·64	17	..	1	1	19
1909	nil.	2	2	1	1	6
Totals		37	9	6	2	54

During the past 5 years, only 5 deaths have occurred from any of the principal epidemic diseases, viz: 2 from whooping-cough in 1906, 1 from whooping cough in 1907 and 2 from scarlet fever in 1908."

Erysipelas.—Only one non-fatal case of this disease occurred, the same number as in the previous year. The patient, an adult female, was notified in January from Reading Street.

Enteric Fever.—Two fatal cases of this disease occurred, as against one non-fatal case in the previous year.

The first case was a man aged 35 years, notified from Ashford Road on September 10th, and terminated fatally the following day. Although full enquiries were made to arrive at the origin of the case, none was traceable. The man had worked away from home a good deal, and possibly may have contracted the disease while away at work.

The second case, a young man 18 years of age, was notified from the Union Workhouse on the 9th November, whence he had been removed from Tanyard Cottages on the 7th. The patient died on the 11th November.

The young man had been employed at a Baker's shop, and in this case also the cause of the disease was remote, nothing being found at the house of a suspicious nature.

Disinfection was carried out in both cases.

No cases of **Small-pox** or **Puerperal Fever** occurred throughout the year.

Tuberculosis in all its forms caused 5 deaths during the year, as compared with 8 in 1909. Of these, 4 were certified as due to Phthisis (consumption of the lungs) as against 2 in 1909. The death-rate for all forms of the disease was 1·62, and the Phthisis death-rate 1·29 per 1,000 of population.

The death-rate in this district from all forms of the disease in **1909** was 2·58, and the Phthisis death-rate 0·64 per 1,000 of population, as compared with rates of 1·52 and 1·08 for England and Wales in that year. The comparative figures for 1910 for the country generally are not yet available.

One case was brought to my notice under the voluntary system of notification in practice, a woman aged 27 years.

No notifications were received by me under the Public Health (Tuberculosis) Regulations, 1908.

I keep the Sanitary Inspector informed of all deaths from Phthisis, obtaining the necessary information from the death returns, and disinfection is carried out if necessary, or disinfectants supplied.

Your Council have also a supply of literature, &c., containing instructions and advising the precautions which should be taken.

HOSPITAL ISOLATION.

I have nothing to add to the remarks contained in my report referred to under the heading of Scarlet Fever.

B.—NON-NOTIFIABLE INFECTIOUS DISEASES.

For the third successive year, no deaths resulted from **Measles, Influenza, Whooping-cough, or Diarrhœa.**

Common Lodging Houses.—There are still no Common lodging houses in the district.

Dairies, Cowsheds, and Milkshops.—The number of persons on the Register is the same as in 1909, viz : 14. There has been one alteration, one person having gone off and another been put on the Register.

They are classified thus :

Cowkeepers and Dairymen	6
Cowkeepers and Purveyors	6
Cowkeeper	1
Purveyor	1
	<hr/>
	14
	<hr/>

The premises have been conducted in a satisfactory manner, any necessary work required to be done being carried out on request.

No complaints have been received as to the quality of the milk supplied in the district, nor has any cause for suspicion been found.

Regulations under the Dairies, Cowsheds, and Milkshops Order of 1885 have been in force in the district since September 30th, 1905.

Slaughter-houses.—These are still 4 in number. and have been conducted satisfactorily. Bye-laws for their regulation are in force.

The meat supply of the district may be regarded as good, and no cases of slaughtering “screwy” animals for human consumption has come to the notice of your officials.

Factory & Workshop Act, 1901.—The premises coming under supervision under this Act and the conditions under which the work is carried out are good.

The Register contains the same number of entries as in 1909, viz :

Factories:	Millers	2
	Printer	1
	Engineer	1
	Bottleswasher	1
		<hr/>
		5

Workshops :	Bakehouses	6
	Laundries	3
	Dressmakers	} 6
	& Milliners	
	Saddler	1
	Cabinet Makers	2
		—18
		—
	Total	23
		—

Part 3, which includes Sect 22 of the Public Health Acts Amendment Act, was adopted on May 1st, 1903, and came into force on 9th June, 1903.

Refuse Removal.—This is done by the Council's own men, and is very successfully carried out, there having only been one case of excessive accumulation of refuse reported during the year.

The same "tip" is used in Coombe Lane for its disposal.

Drainage.—An inspection has during the year been made by Mr. Mortley of all closets in the district, and the following is the result as regards types :

Midden	36
Earth	16
Pail	19
With Flush	220
Without „	525
	—
	816
	—

Water Supply.—A considerable portion of the district is supplied by the Cranbrook Water Company. Throughout the year complaints were made from time to time by persons taking this supply, (both in this and other local areas) of the water being extremely thick and dark, and unfit for any kind of domestic use.

I examined it on several occasions and found the defects due to excess of iron and earthy deposits, but although physically unfit for consumption, the deterioration was not due to any kind of dangerous animal or vegetable pollution.

The Company were aware of the deterioration and causes, viz : increasing consumption, and too little engine power.

A statement of the action of the Company appeared in a report of their half yearly meeting, an account of which was given at length in the "Kentish Express and Ashford News" for September 3rd, 1910.

I am indebted to Mr. C. Duncan Murton, Secretary to the Water Company, for the following, written after the close of the year 1910, in answer to inquiries I made :

"In 1909 we began to be dissatisfied with the result of the filtering process, though the water was reported on as "a satisfactory water and the treatment adopted for the removal of iron is evidently effective."

"The question of Engine and Pump power also being a matter requiring very serious attention, as our staff were working too long, and the Engine was doing too much and we were unable to stop for a sufficient length of time to overhaul it. After much discussion and consideration it was resolved to put in a new Suction Gas Plant and to adopt Candy Filters.

"The new Suction Gas Plant can pump 24,000 gallons per hour instead of 16,000, the amount pumped by the old steam engines.

"The Candy Filters are, I take it, well known to you and do not require any description.

"I have sent you a copy of Dr. Howarth's analysis made within a month or two.

“As to the disturbance of the water, you will recollect that
 “we draw from a borehole with the old engine, and the bore-
 “hole is necessarily filled with pumps. To put down a new
 “engine and pumps it was necessary to sink a new borehole.
 “To go any distance from the existing borehole was to run a
 “very good chance of missing the water altogether in this
 “neighbourhood of tipped up strata.

“Before sinking the new borehole we had the new filtering
 “plant erected, but owing to a constant churning of the water
 “in the new borehole by the boring tube, the water and iron
 “in the old borehole were disturbed, and we found that we
 “were pumping through from one borehole to another.

“We also went through a bed of fine stuff when sinking the
 “new borehole which we did not meet in the old one, and this,
 “curiously enough, apparently had some affinity for iron and
 “was too much for the filters, which were then of course very
 “much more than ample for filtering the 16,000 gallons
 “pumped per hour.

“The result of all this was that no doubt that fresh iron got
 “into the mains and caused the discolouration.

“Then came the trouble of the breakdown of the Engines
 “and the necessity to pump from Hawkhurst and take a supply
 “from Biddender. In both cases the result was the same—
 “the water flowed in a contrary direction whilst pumping was
 “going on and back in the usual direction when pumping
 “stopped, and the supply was by gravity, and was stirring up
 “twice a day all the iron in the mains.

“Attempts were made to flush out the mains when the
 “Steam Pumping Plant was repaired, but it is a very big
 “business to wash out some sixty miles of mains, and it was
 “not until the new plant was in working order that we have
 “been able to do this.

“The mains have been emptied twice all the way through
 “their length, refilled, and the outlets left open until the water
 “came clear, and it is now quite a long time since we had a
 “single complaint from any consumer.

“As regards the rest of your letter, the depth of the well is “exactly the same as the old one. We hoped to get down “deeper, but found that we began to lose water, and had to “stop and plug the bottom of the new borehole.

“With regard to the new plant, its capacity is 24,000 gallons “per hour as I have mentioned. The pumps are made by “Warners, the well-known pump makers, and it is driven by “suction gas produced on the premises, the engine and plant “being one of Crossleys.

“The filters I have mentioned, are three filters about eight “feet in diameter, fully capable of dealing with the 24,000 “gallons pumped through.”

I have during the year made three analyses of water from private wells, the quality of which was doubtful. In two cases the water was quite unfit for drinking purposes, and the third required filtration.

Elementary Schools.—No certificates have been given by me for closing elementary schools.

Housing & Town Planning Act, 1909.—I attended a meeting of the Council and explained as far as possible what would be required to be done as regards house inspection, and the keeping of records in accordance with the provisions of this Act, and at the end of the year my suggestions were under the Council’s consideration.

Adoptive Acts.—The following are in force :

Public Health Improvement Act, 1860.

“ “ Acts Amendment Act, 1890, parts 2 & 4
Infectious Diseases (Prevention) Act, 1890.

The adoption of parts 2, 3 and 4 of the Act of 1907 has not been settled.

Bye-laws and Regulations.—In addition to Regulations with regard to Dairies, &c., and bye-laws with regard to slaughterhouses, Bye-laws with respect to New Streets and Buildings were adopted on 21st June. 1906, and received the sanction of the local Government Board on August 11th of that year ; also Bye-laws with respect to Nuisances.

The hops grown within the Borough of Tenterden are nearly all picked by the local people.

No inquiries by the Local Government Board or County Council have been held during the year.

The Sanitary Officers (Outside London) Order, 1910.—On the 13th December, 1910, the Local Government Board issued a General Order and Regulations revising the regulations relating to Medical Officers of Health and Inspectors of Nuisances of Urban and Rural Districts.

This Order reproduces certain of the provisions contained in the Orders of 23rd March, 1891, and prescribes some new provisions.

The two Orders of 23rd March, 1891, referred to are rescinded, and the provisions of the new Order were to come into operation on 1st January, 1911, except those of Article 10, relating to tenure of office, which takes effect on the 1st April, 1911.

Article 19. Sub-clause (13) requires Medical Officer of Health to furnish the Board with a weekly list of all cases of infectious diseases, and to furnish the County Medical Officer of Health with a duplicate of such list.

„ Sub-clause (15) requires a Medical Officer of Health to report to the Board any cases of Plague, Cholera, or Small-pox.

„ Sub-clause (16) requires a Medical Officer of Health to supply the Board with three copies of his Annual report and one copy of any special report, and urges Councils to have these former reports printed.

Article 20 Deals with the duties of Inspectors of Nuisances.

I addressed a letter to the Board on the subject of sending the weekly returns of infectious disease, and on receiving their reply made an arrangement for sending these returns which should prove satisfactory.

In return the Board furnishes a weekly summary of the main contents of the returns for all sanitary Districts in England and Wales.

Legal Proceedings.—There has been no necessity to take proceedings in any case.

The conditons affecting the **Health of the District** at the end of the year were entirely satisfactory, the two cases of enteric Fever in September and November being the only cases notified since the beginning of April.

The report of the Sanitary Inspector, Mr. Mortley, of the work carried out by him, the statistical tables required by the Local Government Board, and the table provided by the Secretary of State for recording action taken under the Factory & Workshops Act. 1901, are appended.

I have the honour to be, Gentlemen,

Your obedient servant,

JAMES SCOTT TEW.

March 9th, 1911.

Sanitary Report for the year ending 31st December, 1910.

40 cases as under have been dealt with—

Accumulations	...	...	1
Drains obstructed	...	...	4
Drains repaired	...	...	3
Foul Cesspools	...	...	2
Sink drains neglected...	...	...	5
Cottages in bad sanitary condition			4
New drains	...	...	1
Back yards in bad condition		...	1
Cottages disinfected	...	...	13
Nuisances from keeping fowls		...	1
Water from wells condemned		...	2
Overcrowding	...	...	3
			—
		Total	40
			—

The Dairies, Cowsheds, and Milkshops Regulations have been satisfactorily complied with during the year.

W. S. MORTLEY,

Inspector of Nuisances.

TABLE 1.

Vital Statistics of Whole District during 1910 and previous Years.

YEAR.	BIRTHS.				TOTAL DEATHS REGISTERED IN THE DISTRICT.				Deaths of Deaths of Non- residents registered in Public Institutions in the District.			NETT DEATHS AT ALL AGES BELONGING TO THE DISTRICT.		
	Population estimated to Middle of each year.	Number		Rate.	Under 1 year of age		Rate per 1000 Births registered	At all ages.		TOTAL DEATHS IN PUBLIC INSTITUTIONS IN THE DISTRICT.	Public Institutions in the District.	Public Institutions beyond the District.	Number	Rate.
		3.	4.		5.	6.		7.	8.					
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.		
1900	3261	77	23.6	5	64	72	22.0	18	14	...	58	17.7		
1901	3243	86	26.5	6	69	46	14.1	16	10	...	36	11.1		
1902	3220	76	23.6	7	92	60	18.6	15	11	...	49	15.2		
1903	3202	83	25.9	8	96	42	13.1	13	9	...	33	10.3		
1904	3185	76	23.8	6	78	55	17.2	13	9	...	46	14.4		
1905	3167	83	26.2	3	36	52	16.4	19	11	...	41	12.9		
1906	3149	78	24.7	10	128.	56	17.7	10	4	...	52	16.5		
1907	3131	84	26.8	7	83	54	17.2	18	12	...	42	13.4		
1908	3114	75	24.0	1	13	36	11.5	11	4	...	32	10.2		
1909	3097	71	22.9	9	126	61	19.6	14	6	...	55	17.7		
Averages for years 1900-1909.	3176	78	24.8	6	78	53	16.7	14	9	..	44	13.9		
1910	3079	59	19.1	5	84	48	15.5	10	4	...	44	14.2		

Institutions within the District receiving sick and infirm persons from outside the District.

Union Workhouse.

Is the Union Workhouse within the District?

Yes.

Area of District in acres
(exclusive of area covered by water).

8.925

Total population at all ages
Number of Inhabited houses
Average number of persons per house

3,243
718
4

Census of 1910

TABLE III
Cases of Infectious Disease notified during
the Year 1910.

NOTIFIABLE DISEASE.	CASES NOTIFIED IN WHOLE DISTRICT.						
	At all Ages.	At Ages—Years.					
		Under 1.	1 to 5	5 to 15	15 to 25	25 to 65	65 and upwards
Small-pox ...	...	...	...	...	...	...	...
Cholera ...	...	...	...	...	...	...	...
Diphtheria (including Membranous croup) ...	...	...	...	...	...	...	...
Erysipelas ...	1	...	...	...	...	...	1
Scarlet fever ...	10	...	2	7	1	...	...
Typhus fever ...	...	...	...	...	...	...	...
Enteric fever ...	2	...	...	...	1	1	...
Relapsing fever ...	...	...	...	...	...	...	...
Continued fever ...	...	...	...	...	...	...	...
Puerperal fever ...	...	...	...	...	...	...	...
Plague ...	...	...	...	...	...	...	...
Phthisis ...	...	...	...	...	...	...	...
Voluntary ...	1	...	...	...	...	1	...
Poor law ...	...	...	...	...	...	...	...
Total ...	14		2	7	2	2	1

SCHEDULE B.

1910.

Causes of Death.	All Ages.	Under 1.	1—5	5—15	15—26	25—65	65 & upwards	Deaths in Public Institutions in the district whether of Residents or Non-residents
Small-pox .. ..	..	..	..	..	..	..	..	..
Measles .. ..	..	..	..	..	..	..	..	..
Scarlet Fever .. ..	..	..	..	..	..	..	..	..
Typhus Fever .. ..	..	..	..	..	..	..	..	..
Epidemic Influenza .. ..	..	..	..	..	..	..	..	..
Whooping Cough .. ..	..	..	..	..	..	..	..	..
Diphtheria Membranous Croup .. ..	..	..	..	..	..	..	..	..
Croup .. ..	..	..	..	..	..	..	..	..
Enteric Fever	2	..	..	..	1	1	..	1
Asiatic Cholera .. ..	..	..	..	..	..	..	..	..
Diarrhoea, Dysentery .. ..	..	..	..	..	..	..	..	..
Epidemic or Zymotic Enteritis .. ..	..	..	..	..	..	..	..	..
Enteritis .. ..	..	..	..	..	..	..	..	..
<i>Other continued Fevers</i> .. ..	..	..	..	..	..	..	..	..
.....
.....
.....
Erysipelas .. ..	..	..	..	..	..	..	..	..
Puerperal Fever .. ..	..	..	..	..	..	..	..	..
<i>Other septic diseases</i> .. ..	..	..	..	..	..	..	..	..
.....
.....
Intermittent Fever and } Malarial Cachexia	..	..	..	..	..	..	..	..
Tuberculosis of Meninges .. ..	..	..	..	..	..	..	..	..
Tuberculosis of Lungs	4	..	..	..	2	2	..	..
Other forms of Tuberculosis	1	1	..	..	..	..	..	..
Alcoholism .. ..	..	..	..	..	..	..	..	..
Cancer	6	..	..	..	..	5	1	1
Premature Birth	2	2	..	..	..	..	..	..
Developmental Diseases	1	..	..	1	..	..	..	..
Old Age	9	..	..	..	..	1	8	2
Meningitis .. ..	..	..	..	..	..	..	..	..
Inflammation and Softening } of Brain	..	..	..	..	..	..	..	..
Organic Diseases of Heart .. ..	..	..	..	..	..	..	..	..
Acute Bronchitis .. ..	..	..	..	..	..	..	..	..
Chronic Bronchitis	1	..	..	..	..	..	1	..
Lobar (Croupous) Pneumonia .. ..	..	..	..	..	..	..	..	..
Lobular (Broncho-) Pneumonia	2	1	..	..	..	1	..	..
Diseases of Stomach .. ..	..	..	..	..	..	..	..	..
Obstruction of Intestines	1	..	..	..	..	..	1	..
Cirrhosis of Liver .. ..	..	..	..	..	..	..	..	..
Nephritis and Bright's Disease .. ..	..	..	..	..	..	..	..	..
Tumours and Other Affections } of Female Genital Organs	..	..	..	..	..	..	..	..
Accidents and Diseases of } Parturition	..	..	..	..	..	..	..	..
Deaths by Accident or } Negligence	..	..	..	..	..	..	..	..
Deaths by Suicide .. ..	..	..	..	..	..	..	..	..
Deaths from Ill-defined Causes .. ..	..	..	..	..	..	..	..	..
All other Causes	15	1	..	..	2	2	10	6
ALL CAUSES	44	5	..	1	5	12	21	10

TABLE V
INFANTILE MORTALITY DURING THE YEAR 1910,
Deaths from stated Causes in Weeks and Months under
One Year of Age.

Causes of Death.		Under 1 Week.	1-2 weeks	2-3 weeks	3-4 weeks	Total under 1 month	1-2 Months.	2-3 Months.	3-4 Months.	4-5 Months.	5-6 Months.	6-7 Months.	7-8 Months.	8-9 Months.	9-10 Months.	10-11 Months.	11-12 Months.	Total Deaths under 1 year
ALL CAUSES	Certified	...	1	...	...	1	1	...	...	1	..	...	...	...	...	...	1	4
	Uncertified	..	...	...	...	...	..	...	...	...	1	...	...	...	...	...	...	1
i. Common infectious Diseases.	Small-pox	..	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Chicken-pox	..	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Measles	..	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Scarlet Fever	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Diphtheria (including Membranous Croup	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Whooping Cough	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
ii. Diarrhoeal Diseases <i>See Notes to Table IV:</i>	Diarrhoea all forms	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Enteritis, Muco-enteritis, Gastro-enteritis	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Gastritis, Gastro-intestinal Catarrh	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Premature Birth	...	...	1	...	1	1	...	...	...	...	...	...	...	...	...	...	2
iii. Wasting Diseases	Congenital Defects	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	<i>See Notes to Table IV.</i>	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Injury at Birth	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Want of Breast-milk, Starvation	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Atrophy, Debility	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Marasmus	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
iv. Tuberculous Diseases	Tuberculous Meningitis	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	<i>See Notes to Table IV.</i>	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Tuberculosis Peritonitis, Tabes Mesenterica	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Other Tuberculous Diseases	..	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	1
	<i>See Notes to Table IV.</i>	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Erysipelas	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
v. Other Causes.	Syphilis	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Rickets	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Meningitis (not Tuberculous)	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Convulsions	..	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	1
	Bronchitis	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Laryngitis	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Pneumonia	..	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1
	Suffocation, over-lying	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other causes		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
		...	1	...	...	1	1	...	...	1	1	...	...	...	...	1	...	5

Population estimated to middle of 1910, 3,079

Births in the year { legitimate 56
illegitimate 3

Deaths ,, { legitimate infants 5
illegitimate ,, 0

Deaths from all causes at all ages 44

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on the administration of the Factory and Workshops Act, 1901, in
connection with

FACTORIES, WORKSHOPS, WORKPLACES, AND HOMEWORK.

1.—INSPECTION of FACTORIES, WORKSHOPS & WORKPLACES

*Including Inspections made by Sanitary Inspectors or Inspectors
of Nuisances.*

Premises. (1)	Number of		
	Inspections (2)	Written Notices. (3)	Prosecutions. (4)
Factories (Including Factory Laundries)	7		
Workshops (Including Workshop Laundries)	33		
Workplaces (Other than Outworkers' premises included in part 3 of this Report)			
Total	40		

6.—DEFECTS FOUND IN FACTORIES, WORKSHOPS AND WORKPLACES.

Particulars. (1)	Number of Defects.			Number of Prosecutions (5)
	Found. (2)	Remedied. (3)	Referred to H.M. Inspector. (4)	
<i>Nuisances under the Public Health Acts—</i> Want of Cleanliness ...	3	3		
Total ...	3	3		

Section 22 of the Public Health Acts Amendment Act, 1890,
has not been adopted.

3—HOME WORK.

Nil.

4.—REGISTERED WORKSHOPS.

Workshops on the Register (s. 131) at the end of the year. (1.)				Number. (2)
Important classes of workshops, such as workshop bakehouses, may be enumerated here.	Factories	...	...	5
	Bakehouses	...	...	6
	Laundries	...	..	3
	Other Trades	...	..	9
Total number of Workshops on Register				23

5—OTHER MATTERS.

Nil.

*J. S. TEW,**Medical Officer of Health.**March, 9th, 1911.*